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**Attention: Medicaid Physicians, IRHCs, County Health Dept, PBRHCs, FQHCs, and Nurse Practitioners and Physician Assistants.**

**Crosswalk Codes for Chemotherapy and Non-Chemotherapy**

Effective for Dates of Service January 1, 2006 and thereafter, the Alabama Medicaid Agency will adopt the new CPT's Chemotherapy and Non-Chemotherapy administration codes. Alabama Medicaid will also discontinue coverage of the temporary G codes designated for Chemotherapy and Non-Chemotherapy administration codes effective December 31, 2005. The temporary G codes are effective for services provided on or after July 1, 2005 and before January 1, 2006. The crosswalk between the previous codes and the new codes is outlined on page 2 of this Alert. The following CPT drug administration codes will remain in effect and covered for 2006. Please refer to the CPT 2006 guidelines for Hydration, Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy) and Chemotherapy Administration codes. The following CPT code ranges are:

- CPT code ranges 90760 through 90775, and
- CPT codes ranges 96401 through 96542.

The change to the new codes brings about an improvement in billing and reporting codes through the creation of new codes to identify initial infusions and additional sequential infusions. There are also new codes to identify additional non-chemotherapy sequential intravenous pushes and intravenous chemotherapy pushes for additional drugs.

Alabama Medicaid has established the following new guidelines that should be utilized by physicians when billing for administration codes.

- For non-chemotherapy injections, services described by CPT codes 90772, 90774, and 90775 may be billed in addition to other physician fee schedule services billed by the same provider on the same day of service.
- For IV infusions and chemotherapy infusions, if a significant separately identifiable E & M service is performed, the appropriate E & M CPT code should be reported utilizing modifier 25.
- When administering multiple infusions, injections, or combinations, only one "initial" drug administration service code should be reported per patient per day, unless protocol requires that two separate IV sites must be utilized. The initial code is the code that best describes the service the patient is receiving and the additional codes are secondary to the initial code.
- "Subsequent" drug administration codes, or codes that state the code is listed separately in addition to the code for the primary procedure, should be used to report these secondary codes. If an injection or infusion is of a subsequent or concurrent nature, even if it is the first such service within that group of services, then a subsequent or concurrent code from the appropriate section should be reported.
- If the patient has to come back for a separately identifiable service on the same day, or has 2 IV lines per protocol, these services are considered separately billable with a modifier 76.

If you need additional clarification or information, please contact Mary Timmerman, Associate Director, Medical Support Programs by e-mail at [mtimmerman@medicaid.state.al.us](mailto:mtimmerman@medicaid.state.al.us) or by phone at (334) 242-5014. Chapter 28 and Appendix H of the Alabama Medicaid Provider Manual will also be updated in March 2006.

January 6, 2006

# Code Crosswalk

For date of Service January 1, 2006 and after

Old Code	New Code	Descriptor	Add-On Code
G0345	90760	Intravenous infusion, hydration; initial, up to 1 hour	
G0346	90761	Intravenous infusion, hydration; each additional hour, up to 8 hours (List separately in addition to code for procedure)	Yes
G0347	90765	Intravenous infusion, for therapy, prophylaxis, or diagnosis; initial, up to 1 hour (Specify substance or drug)	
G0348	90766	Intravenous infusion, for therapy, prophylaxis, or diagnosis; (specify substance or drug) each additional hour, up to 8 hours (List separately in addition to code for procedure)	Yes
G0349	90767	Intravenous infusion, for therapy, prophylaxis, or diagnosis (Specify substance or drug); Additional sequential infusion, up to 1 hour (List separately in addition to code for procedure)	Yes
G0350	90768	Intravenous infusion, for therapy, prophylaxis, or diagnosis (Specify substance or drug); Concurrent infusion (List separately in addition to code for procedure)	Yes
G0351	90772	Therapeutic, prophylactic, or diagnostic injection (Specify substance or drug); Subcutaneous or Intramuscular	
90783	90773	Therapeutic, prophylactic or diagnostic injection (Specify substance or drug); intra-arterial	
G0353	90774	Therapeutic, prophylactic or diagnostic injection intravenous push, single or initial substance/	
G0354	90775	Therapeutic, prophylactic or diagnostic injection; each additional sequential intravenous push of a new substance/drug	Yes
G0355	96401	Chemotherapy administration, subcutaneous or intramuscular; Non-hormonal antineoplastic	
G0356	96402	Chemotherapy administration, subcutaneous or intramuscular; hormonal antineoplastic	
G0357	96409	Chemotherapy administration, intravenous; push technique, single or initial substance/drug	
G0358	96411	Chemotherapy administration, intravenous push technique, each additional substance/drug (list separately in addition to code for primary procedure)	Yes
G0359	96413	Chemotherapy administration, intravenous infusion technique, up to 1 hour, single or initial substance/drug	
G0360	96415	Chemotherapy administration, intravenous infusion technique; each additional hour, 1 to 8 hours	Yes
G0361	96416	Chemotherapy administration, intravenous infusion technique; initiation of prolonged chemotherapy infusion (more than 8 hours), requiring use of a Portable or implantable pump.	
G0362	96417	Chemotherapy administration, intravenous infusion technique; each additional sequential infusion (different substance/drug) up to 1 hour (List separately in addition to code for primary procedure)	Yes
96520	96521	Refilling and maintenance of portable pump	
96530	96522	Refilling and maintenance of implantable pump or reservoir for drug delivery, systemic (eg, intravenous, intra-arterial)	
G0363	96523	Irrigation of implanted venous access device for drug delivery systems, Reimbursable only when performed as a single service.	